

Amendment to NED Technical Specifications Version 9 – February 6, 2001

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The following is a summary of changes made to the NED Technical Specifications v. 9 documentation since its publication on November 3, 2000:

NED Technical Specifications document:

- Removed reference to sending the Patient Id Change transfer to MCSCs/DPs.
- Transitional Survivor plans will now be effective for three years following the death of the Active Duty sponsor based on the National Defense Authorization Act FY2001 extension of these benefits.
- Added new TRICARE USFHP plans for transitional survivors and survivors. These may be referenced in the NED Data Dictionary.
- Clarified that the jurisdiction edits cannot be supported for OCONUS or APO/FPO addresses since these are not part of the Service Area File provided to DMDC.

NED Technical Specifications Appendix A:

- Section 1.1, Fee Section of Enrollment Information Transfer - Changed the Enrollment Management Contractor Policy Enrollment Period Begin Calendar Date (EMC_PEP_BGN_DT) to the Health Care Delivery Program Policy Enrollment Period Begin Calendar Date (HCDP_PEP_BGN_DT).
- Section 2.1, Primary Care Manager Information Transfer – Changed usage rule for the HCDP System Identifier to situational since it will not be populated in the conversion “gold” files.
- Sections 3.1, Fee Payment Transfer Format; 4.1, PCM Batch Change Transfer Format; 9.1, Civilian Primary Care Manager File Layout – Indicated that the HCDP System Id in the header of each transfer should be left blank.
- Sections 3.1 and 4.1, Policy Section of Fee Payment Transfer and PCM Batch Change Transfer – Changed the Enrollment Management Contractor Policy Enrollment Period Begin Calendar Date (EMC_PEP_BGN_DT) to the Health Care Delivery Program Policy Enrollment Period Begin Calendar Date (HCDP_PEP_BGN_DT).
- Sections 3.1, 5.1 and 6.1 Fee Payment Transfer , Batch PCM Acknowledgment Transfer and Fee Payment Acknowledgement Transfer – Corrected the total lengths.
- Section 9, Civilian PCM File Layout – Removed HCDP Contractor Code in Section 2, PCM Information.

- Section 9.2, Civilian PCM File Source – Clarified that if a PCM may be assigned to beneficiaries in multiple regions, a PCM record for each region should be included on the file.
- Section 10.2, Patient Id Change Source and 10.3, Patient Id Change Usage – Removed references to sending the Patient Id Merge transfer to MCSCs/DPs. It will only be sent to CHCS sites.
- Section 11.2, Patient Id Change Acknowledgement Source and 11.3, Patient Id Change Acknowledgement Usage – Removed references to sending the Patient Id Merge transfer to MCSCs/DPs. It will only be sent to CHCS sites, therefore will not be acknowledged by MCSC/DP sites.

NED Technical Specifications Appendix B:

- Section 3, Member Category / Sponsor Status Cross-Reference – Corrected rows for Member Category Codes G, N, S, V.
- Section 5, System / Organization Cross-Reference – Updated Designated Provider (DP) names

NED Technical Specifications Appendix C:

- Included new TRICARE USFHP coverage plans for survivors.
- Included new plans for survivors of sponsors on Guard/Reserve duty < 30 days.
- Sheet B – Enrollment Into Health Benefit Program: Changed the end date of the TRICARE Senior Prime demonstration program to December 31, 2001 based on the National Defense Authorization Act FY2001 extension of this program.
- Sheet F – Modification of Health Benefit Program Enrollment (Transfer): Eliminated rule requiring that the transfer date fall within the policy enrollment period (PEP) of an existing policy for the new contractor, if applicable. If modifications to the PEP are necessary, DOES will perform them in the background.
- Sheet D – Modification of Health Benefit Program Enrollment (PCM Change): Clarified that modifications to a PCM Selection Begin Calendar Date may only be made for the current or future PCM and modifications to a PCM Selection End Reason Code may only be made for the previous PCM.

NED Data Dictionary v.4:

- Corrected HCDP Plan Coverage Name for HCDP Plan Coverage Code 120 (TRICARE Senior Prime Individual Coverage for Retired Sponsors and Family Members).
- Added HCDP Plan Coverage Codes for USFHP Direct Care plans to support the over-65 transitional survivor and survivor beneficiaries.

- Added plans for survivors of Guard/Reserve member.
- Changed definition for Contractor Operator Identifier to clarify that this is a DEERS-assigned Id.
- Amended list of Transfer Type Codes based on MCSC feedback from v.9.
- Added values K and L for PCM Selection End Reason Code and Prior PCM Selection End Reason Code. 'K' will be used by DOES upon changes to another plan within the HCDP (e.g., individual to family) where the PCM does not change; 'L' may be selected by the user when the enrollee switches to a plan in a different HCDP and the PCM does not change.